UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

TEMPORARY

FORM D

OMB APPROVAL
OMB Number: 3235-0076
Expires:
Estimated average burden
hours per response.......4.00

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an am	endment and name h	as changed, and indic	cate change.)		
Offer and Sale of Series B Preferred	Stock				
Filing Under (Check box(es) that apply):	Rule 504	Rule 505	Rule 506	Section 4(6)	☐ ULOE
Type of Filing: New Filing	☐ Amendment			4	
	A.	BASIC IDENTIF	FICATION DATA		LIBERT COURT TO THE COURT WHILE HAVE THE TREE HAVE BEEN LABEL THAT
1. Enter the information requested about the	e issuer.				
Name of Issuer (check if this is an amen	dment and name has	changed, and indicate	e change.)	_	
Sriya Innovations, Inc.					08062914
Address of Executive Offices		(Number and Stree	t, City, State, Zip Cod	e) Telephone Nurr.	00002514
2240 Snug Harbor, Marietta, GA 30	066			770-424-8512	ULD)
Address of Principal Business Operations		(Number and Stree	t, City, State, Zip Cod	e) Felephone Numb	er (Including Area Code)
(if different from Executive Offices)			1110	1.	CC (IO)
			OCT	3 1 2008 40	121 222000
Brief Description of Business			001	0 0 2000	
Consulting and research relating to i	ndustrial and agr	i-biotechnology	THOMS	ON REUTERS	Machinera Be
Type of Business Organization					ร:กา
□ corporation	☐ limited partners	hip, already formed	☐ oti	her (please specify):	טעאוו
☐ business trust	☐ limited partners	-	_		
	<u> </u>	Month	Year	··· ··	
Actual or Estimated Date of Incorporation of	r Organization:	1 1	0 7	☑ Actual ☐	Estimated
Jurisdiction of Incorporation or Organization	-	vo-letter U.S. Postal	Service Abbreviation	for State:	
	CN for C	Canada; FN for other	foreign jurisdiction)		
GENERAL INSTRUCTIONS Note:	This is a special T	emporary Form D (17 CFR 239.500T) tl	hat is available to be fil	led instead of Form D (17 CFR
239.500) only to issuers that file with the					
on or after September 15, 2008 but before	March 16, 2009. D	During that period, a	n issuer also may file	in paper format an ini	tial notice using Form D (17 CFR
239.500) but, if it does, the issuer must fi	le amendments usin	g Form D (17 CFR	239.500) and otherw	ise comply with all the	requirements of § 230.503T.
Federal:	foring of cognition is	lianga an an avar	untion under Begulati	ion D or Section 4(6) 1	7 CVD 220 501 at any or 15 U.S.C.
Who Must File: All issuers making an off 77d(6).	tering of securities if	renance on an exer	npuon under <u>Regulau</u>	ion D or Section 4(6), 1	7 CFR 230.501 et seq. of 15 U.S.C.
When To File: A notice must be filed no	o later than 15 days	after the first sale of	of securities in the of	ffering. A notice is de-	emed filed with the U.S. Securities
and Exchange Commission (SEC) on the				iven below or, if receiv	ved at that address after the date on
which it is due, on the date it was mailed					
Where To File. U.S. Securities and Exch					any not manually signed must be a
Copies Required: Two (2) copies of this photocopy of the manually signed copy o			of which must be in	anually signed. The C	opy not manually signed must be a
Information Required: A new filing mus			mendments need onl	v report the name of th	ne issuer and offering, any changes
thereto, the information requested in Part					
need not be filed with the SEC.		-			
Filing Fee: There is no federal filing fee.	•				
State:		1 : (4. 1 0.00 1	E (111 OF)	\ 	- 1
This notice shall be used to indicate reli ULOE and that have adopted this form.					
be, or have been made. If a state require					
this form. This notice shall be filed in the					
must be completed.			_	-	-
_		ATTENT	ION		
Failure to file notice in the appro					
appropriate federal notice will n	ot result in a los	ss of an availab	le state exemptio	on unless such exe	mption is predicated on the
filing of a federal notice.					

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - · Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Cheels Day(on) that Apply	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or
Check Box(es) that Apply:		M Beneficial Owner	M Executive Officer	M Director	Managing Partner
Full Name (Last name first,	if individual)				
Kilambi, Srinivas					
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Code)			
c/o Sriya Innovationss, Inc	., 2240 Snug Harb	or, Marietta, GA 30066			
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner		□ Director □ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Gunsagar, Kamal			·····		
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Code)			
c/o Sriya Innovationss, Inc	., 2240 Snug Harb	or, Marietta, GA 30066			•
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Joy, Bill				 .	
Business or Residence Addr	•				
c/o Sriya Innovationss, Inc		or, Marietta, GA 30066			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or
					Managing Partner
Full Name (Last name first,	if individual)				
Nazre, Ajit	,				
Business or Residence Addr	•				
c/o Kleiner Perkins Caufie	id & Byers, 2750 S	and Hill Road, Menlo Par	·k, CA 94025		· · · · · · · · · · · · · · · · · · ·
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
KPCB Holdings, Inc.					
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Code)			
c/o Kleiner Perkins Caufie	ld & Byers, 2750 S	Sand Hill Road, Menlo Par	k, CA 94025		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Code)			

•		•	•	B. II	NFORMA	TION ABO	OUT OFFE	RING				
											Yes	No
1. Has ti	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									\boxtimes		
2. What is the minimum investment that will be accepted from any individual?								\$	n/a			
Z. What	is the minim	idiii iiivesiiii	icin that wh	i oc accept	ed from any	marvidua	l	***************************************	***************************************	*************	Yes	No
3. Does	the offering	permit joint	ownership	of a single	unit?			***********			\boxtimes	
	the informa											
offeri	ing. If a pers	on to be list	ted is an ass	sociated pe	rson or age	nt of a brok	er or dealer	r registered	with the SI	EC and/or		n/a
	a state or stans									ssociated		
	(Last name		•									
Business of	or Residence	Address (No	umber and S	Street, City	, State, Zip	Code)						
Name of A	Associated Bi	oker or Dea	ıler								· · · · · · · · · · · · · · · · · · ·	
States in V	Vhich Person	Listed Has	Solicited o	r Intends to	Solicit Pur	chasers						
	II States" or				o someti i ui	chasers						All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	{UT}	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if indiv	vidual)									
Business o	or Residence	Address (No	umber and S	Street, City	, State, Zip	Code)						
Name of A	ssociated Br	oker or Dea	ler					- u				
States in V	Vhich Person	Listed Has	Solicited or	r Intends to	Solicit Pur	chasers						
(Check "A	II States" or	check indivi	iduals State	s)								All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[ил]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if indiv	vidual)									
Business o	r Residence	Address (Ni	umber and S	Street, City	, State, Zip	Code)						
Name of A	ssociated Br	oker or Dea	ler			·	-					
States in W	Vhich Person	Listed Has	Solicited or	Intends to	Solicit Pur	chasers						
	Il States" or			s)								All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$ 15,000,002.57	
	☐ Common ☒ Preferred	3 15,000,002.57	3 15,000,002.57
	Convertible Securities (including warrants)	¢	¢
	Partnership Interests		\$
	·	\$	
	Other (Specify)	\$	\$
	Total	\$ 15,000,002.57	\$ 15,000,002.57
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchase
	Accredited Investors	1	\$ 15,000,002.57
	Non-accredited Investors	0	\$
	Total (for filings under Rule 504 only)	0	\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sole by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	f	
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	Security	_
	Regulation A	-	<u>\$</u> S
	Rule 504	•	\$
	Total		\$ 0.00
	70141		30.00
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish at estimate and check the box to the left of the estimate.	/	
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees		s
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		\$ 0.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$ _15,000,002.57
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	\$ \$	\$
	Purchase of real estate	S	□ \$ <u> </u>
	Purchase, rental or leasing and installation of machinery and equipment	S	□ \$ <u> </u>
	Construction or leasing of plant buildings and facilities	S	□ \$ <u>0.00</u>
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	S 0.00	□ \$ <u>0.00</u>
	Repayment of indebtedness	S0.00	□ \$ <u>0.00</u>
	Working capital	S 0.00	⊠ \$ <u>15,000,002.57</u>
	Other (specify):	□ \$ <u>0.00</u>	\$0.00
Col	umn Totals	S	\$\frac{15,000,002.57}{}
	Total Payments Listed (column totals added)		15,000,002.57

D	FEDER	ΔI	SIGNA	THRE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
Sriya Innovations, Inc.	- Luas	October 17, 2008
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Srinivas Kilambi	President and CEO	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18. U.S.C. 1001.)

		E. STAT	E SIGNATURE			
1.	Is any party described in 17 CFR 230.262 pa	resently subject to any	of the disqualification provisions of such rule?		⊠	
		See Appendix, Col	umn 5, for state response.			
2.	The undersigned issuer hereby undertakes to (17 CFR 239.500) at such times as required	•	lministrator of any state in which this notice is filed	d a notice on Form D		
3.	. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.					
4.	•	which this notice is file	e conditions that must be satisfied to be entitled to ed and understands that the issuer claiming the avai fied.		ion	
	e issuer has read this notification and knows to authorized person.	he contents to be true	and has duly caused this notice to be signed on its	s behalf by the undersi	igned	
Issu	uer (Print or Type)	Signature	STIVEN DE	ate		
_Sri	Sriya Innovations, Inc. October 17, 20					
Name (Print or Type) Title (Print or Type)						

President and CEO

Instruction:

Srinivas Kilambi

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3		4				5 lification
	non-acc	to sell to credited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No	Series B Preferred Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
ΑZ									
AR									
CA		х	\$15,000,002.57	1	\$15,000,002.57	0	\$0.00		Х
СО									
СТ									
DE									
DC									
FL									
GA									
ні									
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
МІ									
MN									
MS			. ———						

APPENDIX

1	T	2	3	4			5 Disqualification		
	non-ac-	to sell to credited s in State l-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No	Series B Preferred Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
мо									
MT									
NE									
NV	<u> </u>				,				
NH									
NJ									
NM	1				. ", =,=				
NY									
NC									
ND									-
ОН									
ОК					· · · · · · · · · · · · · · · · · · ·		*** T *** L *** · · · ·		
OR	1								
PA	1								
RI									
SC			de auto (c		,				
SD									
TN									
TX									
UT									
VT									
VA									
WA									
wv					<u> </u>				
WI									

APPENDIX

1		2	3			4			5
	non-ac	to sell to credited s in State	Type of security and aggregate offering price offered in state			investor and		under Sta (if yes, explana	ification ate ULOE attach ation of granted
	(Part B	-Item 1)	(Part C-Item 1)		(Part C-Item 2)			(Part E	-Item 1)
State WY	Yes	No	Series B Preferred Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
PR									

